

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>AB</i>	<i>535</i>	<i>01/12/02</i>
RESPONSE FORMALITY REVIEW	<i>BE</i>	<i>897</i>	<i>02-01-02</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

Claim	Date
Final	
Original	
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REST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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452
01-17-02
804
02/22